



Commonwealth
of Massachusetts

Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

File with: City or Town Clerk or Election Commission

Fill in Reporting Period dates: Beginning Date: 1/1/2013 Ending Date: 12/31/2013

Type of Report: (Check one)

☐ 8th day preceding preliminary ☐ 8th day preceding election ☐ 30 day after election ☒ year-end report ☐ dissolution

Frederick M. Kalisz, Jr.
Candidate Full Name (if applicable)
Mayor - New Bedford, Massachusetts
Office Sought and District
233 Collette Street, New Bedford, MA 02746
Residential Address
Telephone Number (optional): (508) 726-4200

Kalisz Election Committee
Committee Name
John Beauregard
Name of Committee Treasurer
231 Collette Street, New Bedford, MA 02746
Committee Mailing Address
Telephone Number (optional): (508) 994-4474

SUMMARY BALANCE INFORMATION:

Line 1: Ending Balance from previous report	598.56
Line 2: Total receipts this period (page 3, line 11)	0.01
Line 3: Subtotal (line 1 plus line 2)	598.57
Line 4: Total expenditures this period (page 5, line 14)	168
Line 5: Ending Balance (line 3 minus line 4)	430.57
Line 6: Total in-kind contributions this period (page 6)	0
Line 7: Total (all) outstanding liabilities (page 7)	9,140.96
Line 8: Name of bank(s) used:	Bank of America (Acushnet Ave. Branch) New Bedford, MA

Affidavit of Committee Treasurer:

I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, including all contributions, loans, receipts, expenditures, disbursements, in-kind contributions and liabilities for this reporting period and represents the campaign finance activity of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G.L. c. 55.

Signed under the penalties of perjury: John R. Beauregard (Treasurer's signature) Date: Jan 20, 2014

FOR CANDIDATE FILINGS ONLY: Affidavit of Candidate: (check 1 box only)

Candidate with Committee and no activity independent of the committee

☐ I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G.L. c. 55. I have not received any contributions, incurred any liabilities nor made any expenditures on my behalf during this reporting period.

Candidate without Committee OR Candidate with independent activity filing separate report

☐ I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, including contributions, loans, receipts, expenditures, disbursements, in-kind contributions and liabilities for this reporting period and represents the campaign finance activity of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G.L. c. 55.

Signed under the penalties of perjury: [Signature] (Candidate's signature) Date: Jan 20, 2014

SCHEDULE A: RECEIPTS

M.G.L. c. 55 requires that the name and residential address be reported, in alphabetical order, for all receipts over \$50 in a calendar year. Committees must keep detailed accounts and records of all receipts, but need only itemize those receipts over \$50. In addition, the occupation and employer must be reported for all persons who contribute \$200 or more in a calendar year.

(A "Schedule A: Receipts" attachment is available to complete, print and attach to this report, if additional pages are required to report all receipts. Please include your committee name and a page number on each page.)

Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)
1/16/2013	Bank of America (Acushnet Ave. Branch) New Bedford, MA. 02745 c/o PO BOX 25118, Tampa, Florida 33622	0.01	
Line 9: Total Receipts over \$50 (or listed above)		0	
Line 10: Total Receipts \$50 and under* (not listed above)		0.01	
Line 11: TOTAL RECEIPTS IN THE PERIOD		0.01	← Enter on page 1, line 2

* If you have itemized receipts of \$50 and under, include them in line 9. Line 10 should include only those receipts not itemized above.

SCHEDULE A: RECEIPTS (continued)[illegible]

Line 9: Total Receipts over \$50 (or listed above)

Line 10: Total Receipts \$50 and under* (not listed above)

Line 11: TOTAL RECEIPTS IN THE PERIOD

← Enter on page 1, line 2

* If you have itemized receipts of \$50 and under, include them in line 9. Line 10 should include only those receipts not itemized above.

SCHEDULE B: EXPENDITURES

M.G.L. c. 55 requires committees to list, in alphabetical order, all expenditures over \$50 in a reporting period. Committees must keep detailed accounts and records of all expenditures, but need only itemize those over \$50. Expenditures \$50 and under may be added together, from committee records, and reported on line 13.

(A "Schedule B: Expenditures" attachment is available to complete, print and attach to this report, if additional pages are required to report all expenditures. Please include your committee name and a page number on each page.)

Date Paid	To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	Amount
Jan 16, 2013	Bank of America	(Acushnet Ave. Branch) New Bedford, MA. 02745 c/o PO BOX 25118, Tanna Florida 33622	Monthly Banking Service Charge	14
Feb 13, 2013	Bank of America	(Acushnet Ave. Branch) New Bedford, MA. 02745 c/o PO BOX 25118, Tanna Florida 33622	Monthly Banking Service Charge	14
Mar 15, 2013	Bank of America	(Acushnet Ave. Branch) New Bedford, MA. 02745 c/o PO BOX 25118, Tanna Florida 33622	Monthly Banking Service Charge	14
Apr 16, 2013	Bank of America	(Acushnet Ave. Branch) New Bedford, MA. 02745 c/o PO BOX 25118, Tanna Florida 33622	Monthly Banking Service Charge	14
May 16, 2013	Bank of America	(Acushnet Ave. Branch) New Bedford, MA. 02745 c/o PO BOX 25118, Tanna Florida 33622	Monthly Banking Service Charge	14
Jun 14, 2013	Bank of America	(Acushnet Ave. Branch) New Bedford, MA. 02745 c/o PO BOX 25118, Tanna Florida 33622	Monthly Banking Service Charge	14
Jul 17, 2013	Bank of America	(Acushnet Ave. Branch) New Bedford, MA. 02745 c/o PO BOX 25118, Tanna Florida 33622	Monthly Banking Service Charge	14
Aug 16, 2013	Bank of America	(Acushnet Ave. Branch) New Bedford, MA. 02745 c/o PO BOX 25118, Tanna Florida 33622	Monthly Banking Service Charge	14
Sep 16, 2013	Bank of America	(Acushnet Ave. Branch) New Bedford, MA. 02745 c/o PO BOX 25118, Tanna Florida 33622	Monthly Banking Service Charge	14
Oct 17, 2013	Bank of America	(Acushnet Ave. Branch) New Bedford, MA. 02745 c/o PO BOX 25118, Tanna Florida 33622	Monthly Banking Service Charge	14
Nov 14, 2013	Bank of America	(Acushnet Ave. Branch) New Bedford, MA. 02745 c/o PO BOX 25118, Tanna Florida 33622	Monthly Banking Service Charge	14
12/31/2013	Bank of America	(Acushnet Ave. Branch) New Bedford, MA. 02745 c/o PO BOX 25118, Tanna Florida 33622	Monthly Banking Service Charge	14
Line 12: Total Expenditures over \$50 (or listed above)				0
Line 13: Total Expenditures \$50 and under* (not listed above)				168
Enter on page 1, line 4 → Line 14: TOTAL EXPENDITURES IN THE PERIOD				168

* If you have itemized expenditures of \$50 and under, include them in line 12. Line 13 should include only those expenditures not itemized above.

SCHEDULE B: EXPENDITURES (continued)[illegible]

* If you have itemized expenditures of \$50 and under, include them in line 12. Line 13 should include only those expenditures not itemized above.

SCHEDULE C: "IN-KIND" CONTRIBUTIONS

Please itemize contributors who have made in-kind contributions of more than \$50. In-kind contributions \$50 and under may be added together from the committee's records and included in line 16 on page 1.

[illegible]

* If an in-kind contribution is received from a person who contributes more than \$50 in a calendar year, you must report the name and address of the contributor; in addition, if the contribution is \$200 or more, you must also report the contributor's occupation and employer.

SCHEDULE D: LIABILITIES

M.G.L. c. 55 requires committees to report ALL liabilities which have been reported previously and are still outstanding, as well as those liabilities incurred during this reporting period.

Date Incurred	To Whom Due	Address	Purpose	Amount
12/03/2006	Adamowski & Adamowski	536 Hawthorne St. North Dartmouth, MA 02747	Accounting Fees	4,625
12/31/2006	Direct Communications	c/o 122 East Clinton St. New Bedford, MA 02740	Email/Voting - Direct Marketing	1,391.38
10/31/2006	Drummer Boy Printing	Riverside Ave. New Bedford, MA 0274	Bumper Stickers	446.25
Dec 31, 2007	Frederick M. Kalisz, Jr.	233 Collette St. New Bedford, MA 02746	Loan	2,678.33
Enter on page 1, line 7 → Line 18: TOTAL OUTSTANDING LIABILITIES (ALL)				9,140.96